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Bib Data Sheet

CONFIRMATION NO. 2091

<b>SERIAL NUMBER</b> 09/747,540	<b>FILING DATE</b> 12/22/2000 <b>RULE</b>	<b>CLASS</b> 600	<b>GROUP ART UNIT</b> 3737	<b>ATTORNEY DOCKET NO.</b> GEMS:0130/YOD (15-EC-5791)
<b>APPLICANTS</b> Vincent E. Majkowski, Milwaukee, WI; <b>** CONTINUING DATA *****</b> <b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 02/02/2001</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance		<b>STATE OR COUNTRY</b> WI	<b>SHEETS DRAWING</b> 6	<b>TOTAL CLAIMS</b> 44
Examiner's Signature <i>FS</i> Initials <i>FS</i>		<b>INDEPENDENT CLAIMS</b> 4		
<b>ADDRESS</b> Patrick S. Yoder Suite 330 7915 FM 1960 West Houston, TX 77070				
<b>TITLE</b> Ambulatory arrhythmia system investment planning method and apparatus				
<b>FILING FEE RECEIVED</b> 1222	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	